

ORDER FOR SUPPLIES OR SERVICES					PAGE 1 OF 47
1. CONTRACT/PURCH ORDER/AGREEMENT NO. N0017819D7732		2. DELIVERY ORDER/CALL NO. N6449821F3001		3. DATE OF ORDER/CALL (YYYYMMDD) 2020DEC15	
4. REQUISITION/PURCH REQUEST NO. (b) (4)		5. PRIORITY DO-A3			
6. ISSUED BY NAVAL SURFACE WARFARE CENTER PHILA NSWCPD Philadelphia, PA 19112-1403			7. ADMINISTERED BY (if other than 6) SCD: C		8. DELIVERY FOB <input type="checkbox"/> DESTINATION <input type="checkbox"/> OTHER (See Schedule if other)
9. CONTRACTOR CODE 6J8P0 NAME AND ADDRESS Green Expert Technology Inc. 30 Washington Avenue, Suite A-2 Haddonfield, NJ 08033			FACILITY 969536932		10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) SEE SCHEDULE
			12. DISCOUNT TERMS Net 30 Days WAWF		11. X IF BUSINESS IS <input checked="" type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED
			13. MAIL INVOICES TO THE ADDRESS IN BLOCK SEE SECTION G		
14. SHIP TO CODE SEE SECTION F			15. PAYMENT WILL BE MADE BY CODE HQ0337 DFAS Columbus Center, North Entitlement Operations P.O. Box 182266 Columbus, OH 43218-2266		MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2.
16. DELIVERY/ CALL <input checked="" type="checkbox"/> This delivery order/call is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.					
16. TYPE OF ORDER PURCHASE <input type="checkbox"/> Reference your _____ furnish the following on terms specified herein.					
ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.					
Green Expert Technology Inc. (b) (6) NAME OF CONTRACTOR SIGNATURE TYPED NAME AND TITLE DATE SIGNED (YYYYMMDD)					
<input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:					
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE SEE SCHEDULE					
18. ITEM NO.	19. SCHEDULE OF SUPPLIES/SERVICES			20. QUANTITY ORDERED/ACCEPTED*	21. UNIT
	SEE SCHEDULE				
*If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.				24. UNITED STATES OF AMERICA /s/ Angela Cusati BY: 12/15/2020 CONTRACTING/ORDERING OFFICER	
25. TOTAL (b) (4)				26. DIFFERENCES	
27a. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED:					
b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE			c. DATE (YYYYMMDD)		
e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE			d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE		
f. TELEPHONE NUMBER			g. E-MAIL ADDRESS		
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.			28. SHIP. NO.		
a. DATE (YYYYMMDD)			29. D.O. VOUCHER NO.		
b. SIGNATURE AND TITLE OF CERTIFYING OFFICER			30. INITIALS		
			32. PAID BY		
			33. AMOUNT VERIFIED CORRECT FOR		
			34. CHECK NUMBER		
			35. BILL OF LADING NO.		
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED (YYYYMMDD)	
				40. TOTAL CONTAINERS	
				41. S/R ACCOUNT NUMBER	
				42. S/R VOUCHER NO.	